

510(K) SUMMARY AND CERTIFICATION

NOV 26 2003

[As required by 21 CFR 807.92(c)]

K032774

1. Submitter's Name / Contact Person

Lifecore Biomedical, Inc. 3515 Lyman Blvd Chaska, MN 55318	Diane Brinza Regulatory Affairs Supervisor Ph: 952-368-6394; Fax: 952-368-4278
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2. General Information

Trade Name	RENOVA™ Internal Hex Implant System
Common Name	Endosseous dental implant system
Classification Name	Endosseous implant
Identification of Predicate Devices	Sulzer Dental, Inc.; Screw-Vent and Tapered Screw-Vent Implants; (K013227) Lifecore Biomedical, Inc.; Restore Self-Tapping Implant; (K924589)

3. Device Description

The Lifecore Biomedical RENOVA Internal Hex Implant System consists of two-stage, root-form tapered and straight walled threaded dental implants and associated abutment systems, which provide the clinician with Screw-Retained (UCLA or Universal, Cement-on-Crown (COC), and Overdenture Snap Abutments. The system also includes surgical and restorative instrumentation: twist drills, surgical taps, surgical depth probe, depth gauges, abutment drivers, latch-type drivers, open end wrench, and hand-piece adapters. Lifecore RENOVA implants are available with a Resorbable Blast Media (RBM) roughened surface. All implants have an internal hexagon as a connection and as an anti-rotational feature for the prosthetics.

4. Intended Use

The Lifecore Biomedical RENOVA Internal Hex Implant System is intended for use in partially or fully edentulous mandibles and maxillae, in support of single or multiple-unit restorations including; cement retained, screw retained, or overdenture restorations, and terminal or intermediate abutment support for fixed bridgework.

5. Substantial Equivalence Comparison

The RENOVA Internal Hex Implant System and the predicate Sulzer Dental Screw-Vent implants share a substantially equivalent intended use. The RENOVA, Screw-Vent and Lifecore Biomedical Restore Self-Tapping implants are similar in fundamental scientific technology in that they are all threaded, root form implants constructed of titanium with

roughened surfaces. The subject and predicate devices are similar in size and materials. All three systems offer abutment systems for cement-retained, screw-retained and overdenture restorations as well as associated accessories and instruments. When compared with the predicate devices, no new questions of safety or effectiveness have been raised for the RENOVA system.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

NOV 26 2003

Ms. Diane Brinza
Regulatory Affairs Supervisor
Lifecore Biomedical, Incorporated
3515 Lyman Boulevard
Chaska, Minnesota 55318-3051

Re: K032774

Trade/Device Name: RENOVA™ Internal Hex Implant System
Regulation Number: 872.3640
Regulation Name: Endosseous Implant
Regulatory Class: III
Product Code: DZE
Dated: September 5, 2003
Received: September 8, 2003

Dear Ms. Brinza:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

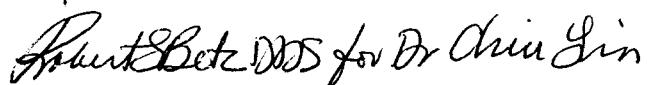
If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4613. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/dsma/dsmamain.html>

Sincerely yours,



Chiu Lin, Ph.D.

Director

Division of Anesthesiology, General Hospital,
Infection Control and Dental Devices

Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

INDICATIONS FOR USE STATEMENT

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510(k) Number (if known): _____

Device Name: RENOVA™ Internal Hex Implant System

Intended Use / Indications for Use:

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Robert Betz, DDS for Dr. Susan Runner

(Division Sign-Off)
Division of Anesthesiology, General Hospital,
Infection Control, Dental Devices

510(k) Number: K032774

PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)
